File-with: lowe Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Reset Form

IA ETHICS AND DAMPAIGN DISCLOSURE BD

Des Moines, Iowa 50319 Fax: 515-281-4073		S, SEE BACK OF FORM SUMMARY PAGE	2010 JAN 20 AM 8: 54	
COMMITTEE NAME (Must b	e same as on Statement of Organ	ization)		
Mike, Sex	e For Mayor		DR-2 DISCLOSURE	
IMPORTANT: Indicate by # type (1)Statewide/Legislative/Judge	of committee you are reporting for: Standing for Retention Candidate (2	State PAC (3) State Party ate (7) School: Board or Other Political pard or Other Political Subdivision PAC	(Rev. 07/2007) REPORT For Office Use Only Comm. #	
CANDIDATE COMMITTEES Candidate Name N'IKE SEK		Political Party (if applicable) Capulo 1 Cap District (if Senate or House) N A	Logged In	_
11	Serte >	Suant to lowa Code sections 688.32/ (5/5) 332-5255 TELEPHONE	(7) and 68A 401(3), the candidate, for a 1.19.10 DATE SIGNED	
	(report date)	REPORT FOR (1) ELECTION Indicate by		
Check if this is final (termi	TO REPORT DATED	f Dissolution Form DR-3.	Local Committees, enter Date of Election 1	n
STATE	MENT OF CASH ON HANG)		
AnnaniMan This as	inning of the reporting period. (To mount MUST be the same as the period or must be zero if this is fi	ital of all funds held by the cash on hand at the end rst report filed.)	· 1,110.59	
· · ·	EY TAKEN IN THIS PERIOD			
Schedule A: Cash	Contributions total (Attach Sched	ule A) (*also see in-kind below)	\$/110.59	
		F)		
		ach Schedule H)		
1	a H applies to Candidates' Com		1110.59	
SUBTRACT TOTA	L MONEY SPENT THIS PERIOD	•	_,	
		("also see debts and loans below	N) 110.59	
		ıle F)		
		port balance must be zero)	<u> </u>	
		dule E)		
		ule F)		
	1	MPG 1' Jaconson	YES _L_NO	
!	WN (Schedule G Attached?)			
CANDIDATE COMMITTEE		mah Bahadula HI	. <i>O</i>	
	ROPERTY (From Schedule H - Atl		asch veer	
STATE COMMITTEES: SU	iomit a reconciled campaign acco	unt benk statement in January of e	eur jear.	

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

SCHEDULE A MO (Rev. 07/03) RI

MONETARY RECEIPTS

CHECK THIS BOX IF AMENDING FORM

(including candidate's personal funds)

COMMITTEE NAM	E(Must be sa	me as on Staten	nent of Organiz	zation)
COMMITTEE NAM	C	<u> </u>	- M .	د ه
11/11/10	<u> </u>	707 C	1 Jany	0 Y

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

RECEIVED (MIM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ (F FO) FUND- RAISER INCOMI
10/9	ID# CK#	Eric Sime 30 Rainbow Dr Humboldt JA		\$ 100-00	
10/9	CK#	Manny Abens 311 35+N Humbold+ IA		100.00	
10/9	ID# CK#	Larry Curran 801 13 St SW Humboldt JA		100.00	
10/9	CK#	Bob Abens Bor Dave S Humbuldt IA		50.∞	
10/1	ID#	Chuck Sexe 20 Bainbow Dr. Humboldt IA	Father	200.00	
10/3	ID# CK#	Porian Sexe 55+herolle ZA	Brother	50.06	
10/17	CK#	Boger + Nancy Lenning 502 b Aves Humboldt		40:00	
10/9	ID#	Tracey Gord 30963+3 Dakota City IA		50-06	
10/24	ID# CK#	Brien Johnson Humboldt FA		50-00	
10/26	1D# CK#	Ed Allen Riot West Bluer Dr Humboldt There		30.00	
		1	SUB-TOTAL	1770	

TOTAL (If last page of this schedule)

of 2 (for Schedule A)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Rolationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

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SCHEDULE MONETARY (Rev. 07/03) RECEIPTS

> CHECK THIS BOX IF FORM

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	AMENDING
Mike Sexe for Mayor	<u> </u>

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32Å(6), prohibits the use of Information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DDYR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE" (If applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
10/18	ID# CK#	Wilbur + Phyllis Moore 702 9 5+5 Humbold + 34		\$20.00	
10) 25	ID# CK#	Charlie + Bert Anderson 2520 Lincoln Ave Humboldt JA		20.00	
10/12	ID# CK#			100.00	
9/4	CK#	Jim Vermear 1225 Riverview Circle Humboldt TA Mike Cherese Sexe (self) 412 2 Aves Humboldt TA	Self	200,59	
	CK#				
	CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID#				

TOTAL (If last page of this schedule)

"Disclosure lew requires condidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no similar relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURE
	CK THIS BOX IF

COMMITTEE	NAME (Musl be s	ame as on Statement of Organization)		
M	ik. Se	xe for Mayor	PURPOSE	AMOUNT
DATE EXPENDED	CANDIDATE ID NUMBER (if applicable)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
(MM/DD/YR)	AND PAC CHECK NUMBER			
,	ID#	Humboldt		
10/26	CK#	Newspapers	Ad	\$ 335.81
	ID#	1	cuse of paper	7 7 70
10/28	CK#	Humboldt Hospital	cuse or paper	32.00
10/2	ID#	Vista Print		9.98
10/26	CK#	VISAC PINCI	Website Fee	(1.18)
3.1	1D#		website rea	9.98
11/26	CK#	Vista Print	website I-CE	(10
	ID#			
	CK#		·	
	ID#		i	
	CK#			
	ID#			
	CK#		:	
	ID#			
	CK#			
3			SUB-TOTAL	\$ 387.77
:			TOTAL (if last page of this schedule)	

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~	-	APPLIES	$T \cap C$	·ANDIDA	LEG: 4	ССМИНТ	TEES	UNI A:
1 1112	BUX	AFFLIES	100	AUUIUA	163 (,	UNIC 1 .

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

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Page	l of		

(for Schedule B)